

Long Beach CARES COVID-19 Emergency Rental Assistance Program

Program Guidelines

The Long Beach CARES Rental Assistance Program (LB CARES) provides emergency rental assistance grants to income-eligible Long Beach households economically impacted during the COVID-19 pandemic through job loss, furlough or reduction in hours or pay.

LB CARES grants are rental payments made on behalf of income-eligible households, up to \$1,000 per month, for a maximum of three months, to maintain housing and/or reduce rental payment delinquency in arrears due to the economic downturn during the COVID-19 pandemic.

Long Beach CARES Rental Assistance Program Eligibility

Eligible households must meet all the following criteria:

1. Renters residing in single-family, multi-unit, or mobile homes located in Long Beach.
2. Annual household income (prior to COVID-19 income loss) does not exceed the U.S. Department of Housing and Urban Development (HUD) established "Moderate-Income" limits (please see Emergency Rental Assistance Income Limits table on page 3 for more detail). Household income eligibility is based on the following two (2) factors:
 - a. The total number of persons residing in the household; and
 - b. The total amount of the annual household income.
3. Economically impacted during the COVID-19 pandemic period beginning March 27, 2020-to present (loss of income due to job loss/lay-off, reduction in hours, furlough, loss of business income, or COVID-19-related medical expenses).
4. Current residential lease or rental agreement with a bona fide landlord/property management company.
5. Household does not receive any other forms of rental assistance payments.
6. Signed Program Participation-Payment Acceptance form from a bona fide landlord/property management agent or company (City will send form to landlord/property management agent or company).
7. Completed W-9 form from a bona fide landlord/property management agent or company (City will send form to landlord/property management agent or company).

8. A completed application and all required supporting documentation must be submitted to be considered for assistance. **Missing documentation will result in a denied application** (no exceptions).

APPLICATION ASSISTANCE AND SUBMISSION INSTRUCTIONS

All application materials will be available online to download on June 29, 2020 at <http://www.longbeach.gov/lbds/lbcares/>

For applicants who do not have access to a computer, internet, and/or printer, a paper application packet is also available by mail or for in-person pick up. To request the application materials by mail, please call (562) 570-3000 or email at LBCares@longbeach.gov

Applications can also be picked up on Tuesdays and Thursdays from 9:00AM-11:00AM, beginning June 30, 2020 until July 23, 2020, at Long Beach City Hall, 411 West Ocean Boulevard, Long Beach, CA 90802.

To assist with the application process, City staff are available to provide technical assistance, beginning June 29, 2020 through July 27, 2020. Please call (562) 570-3000 or email at LBCares@longbeach.gov for additional support.

Applicants are strongly advised to review the Frequently Asked Questions (FAQ) available online at: www.longbeach.gov/lbds/lbcares/

Completed applications can be submitted by mail or dropped off in person. Mailed applications can be submitted beginning Monday, July 13, 2020 until the deadline on Monday, July 27, 2020. Mailed applications must be addressed to:

Long Beach CARES Emergency Rental Assistance Program
411 West Ocean Boulevard, 3rd Floor
Long Beach, CA 90802

Applications can also be dropped off on Tuesdays and Thursdays from 9:00am-11:00am, beginning July 14, 2020 until July 23, 2020, at Long Beach City Hall, 411 West Ocean Boulevard, Long Beach, CA 90802.

All applications must be submitted by July 27, 2020 by 4:30PM. Online application submissions will not be accepted. Late submissions will not be accepted.

APPLICANT INTAKE AND ASSESSMENT PROCESS

Applicant household's eligibility for emergency rental assistance will be determined upon submission of a completed application with all required information and documents. An application checklist will be provided and must be completed and submitted with the application materials.

All received applications will be placed into a lottery and between 1600-1700 applications will be randomly selected. A random lottery will be drawn in August 2020. Staff will review lottery applications for completeness. Additional lottery drawings may occur to replace any incomplete or ineligible applications that were originally selected.

An approved applicant file shall contain all submitted information and documentation necessary to meet all required eligibility criteria and contain completed forms, documentation, and necessary information for all members of an applicant household as indicated on the application and explained below.

RESIDENCY IN ELIGIBLE AREA

An applicant household must reside in a in single-family, multi-unit, or mobile home rental property located in Long Beach.

DEFINITION OF A HOUSEHOLD AND INCOME OF HOUSEHOLD MEMBERS

A **Household** is defined as all the persons who occupy a housing unit. The occupants may be a single family, one person living alone, two or more families living together, or any other group of persons who share living arrangements. Therefore, household member information must include, at a minimum, the following:

- 1) Full names and ages of all family members as well as any unrelated persons living in the residence. All names listed must be included on the rental or lease agreement, income tax returns, and application forms.
- 2) Signature of the primary applicant(s), certifying that the information provided related to the annual household income and members is correct.

ANNUAL INCOME

Annual Income is defined as the total gross amount of income received from all sources by adult individuals of the household who have earned or received income during a 12-month period prior to the March 27, 2020 authorization of the Coronavirus Aid, Relief, and Economic Security Act (CARES Act) to address the COVID-19 pandemic. Additional information on household income is provided in TYPES OF HOUSEHOLD INCOME section below.

To determine program eligibility, all sources of annual income for each household member over the age of 18 and the exact amounts earned from each income source must be accurately documented. The primary applicant(s) are also required to certify by signature that the information provided regarding household members is correct under penalty of perjury.

Eligible households must be below the "Moderate Income" limits for confirmed household size.

EMERGENCY RENTAL ASSISTANCE INCOME LIMITS

Number of Persons	Extremely Low-Income	Low-Income	Moderate-Income
1	\$23,700	\$39,450	\$63,100
2	\$27,050	\$45,050	\$72,100
3	\$30,450	\$50,700	\$81,100
4	\$33,800	\$56,300	\$90,100
5	\$36,550	\$60,850	\$97,350
6	\$39,250	\$65,350	\$104,550
7	\$41,950	\$69,850	\$111,750
8	\$44,650	\$74,350	\$118,950

TYPES OF HOUSEHOLD INCOME

The following is a list of the types of household income most commonly encountered, as well as the kinds of documentation required for verification. This is not intended to provide an exhaustive list of possible income sources, but only those sources most commonly encountered. However, all applicant income sources must be clearly identified and documented in the application.

- A. **Salary Income:** The documentation of salary income must be obtained from at least **one (1) source**. The documentation may be from 2018 or 2019 including Federal income tax returns. The documentation must be properly labeled and compiled in the applicant's case file in a readable format. Acceptable sources of income documentation include the following:
- Federal income tax returns for 2018 or 2019; OR 2018 Federal income tax return AND 2019 W-2 forms (if 2019 tax return not filed yet) or 2019; **OR**
 - Copies of two the applicant's paycheck stubs from January, February and/or March 2020 (prior to loss of income due to COVID-19), establishing the applicant's monthly income
- B. **Self-Employment:** Any income from an adult household member who is self-employed must be documented and verified from at least **one (1)** of the following sources:
- A copy of 2018 or 2019 IRS Form 1040/1040A (tax return), **OR**
 - An affidavit signed by the applicant that includes the name of the household member who is self-employed, the name of the business, and the prior year's estimated annual income (Self-Employment Income Self-Certification Form attached).
- C. **Social Security/Supplementary Security Income/ Social Security Disability:** Income from Federal or State retirement programs and disability must be verified from at least **one (1) source** that may not be older than one year, unless noted below. Acceptable documentation sources include:
- A copy of the applicant's monthly award check; **OR**
 - A copy of a benefit verification letter (also referred to as an "award letter" or "income letter" and can be requested from local Social Security office by applicant); **OR**
 - Copy of a bank statement showing direct deposits of applicant's award check; **OR**
 - Copy of Social Security Form SSA-2458 which verifies benefits (can be requested from local Social Security office by applicant); **OR**
 - Copy of Social Security form SSA-1099 (tax form mailed each year stating total amount of benefits received from the previous year.); **OR**
 - Written certification from the awarding agency verifying the applicant's eligibility and the amount of the monthly benefits.
- D. **Welfare/General Relief:** Income from social aid programs [e.g., California Work Opportunity and Responsibility for Kids (CalWORKs), Temporary Assistance for Needy Families (TANF) must be verified from at least **one (1)** of the following sources:
- Copies of the applicant's most recent bi-monthly award checks, **OR**
 - Copy of most recent Notice of Action or award letter stating the amount of applicant's benefit; **OR**

- Written statement from caseworker stating the applicant's benefit amount; **OR**
 - Written certification from the awarding agency verifying the applicant's eligibility and the amount of the monthly benefits.
- E. **Pension Income:** Pension Income must be verified from at least **one (1)** of the following sources:
- A copy of the pension award letter; **OR**
 - Copies of the applicant's three (3) most recent payment stubs verifying benefit amount; **OR**
 - A copy of the applicant's bank statement demonstrating that the award check was directly deposited into the applicant's account.
- F. **Personal Interest:** Personal interest from savings accounts or dividends from financial investments must be identified and documented as earned income. Adequate verification may include:
- Federal income tax return; **OR**
 - Copies of bank statements; **OR**
 - All pages of investment statements indicating the amount of dividends earned.
- G. **Alimony/Child Support:** Income received from alimony and/or child support payments must be documented and verified from at least **one (1)** of the following sources:
- A copy of applicant's weekly or monthly check; **OR**
 - A copy of a separation or settlement agreement or a divorce decree from a court establishing payments; **OR**
 - A notarized affidavit, signed by the applicant, certifying to the amount of child support received.
- H. **In-Home Supportive Services:** Income earned by a caregiver/caretaker providing in-home supportive services for a different household must be documented through copies of **the three (3)** most recent paycheck stubs, to establish the monthly income.
- I. **Rental Income:** Income received from rental property must be documented as earned income and must be verified from at least **two (2)** of the following sources:
- A copy of the property rental agreement signed by current tenant stating monthly rent;
 - A copy of recent rent check;
 - A copy of the applicant's income tax return declaring earned rental income. May not be older than one (1) year.
 - Rent receipt book.
- J. **No Income:** Should an adult member of the household (18 years and older) have no income to report, documentation to be submitted may include:

- A self-certification (Page 13) signed by the household member declaring he/she does not earn income that can be contributed to the household.

The calculation of gross annual income **shall not include** the following:

- A. **Income from Children**, which is income from the employment of children (including foster children) under the age of 18 years.
- B. **Payments Received for the Care of Foster Children**, including foster adults (usually persons with disabilities, unrelated to the family, who are unable to live alone).
- C. **Lump-Sum Payments**, including additions to family assets, such as inheritances, insurance payments (e.g., health and accident insurance, and worker's compensation), capital gains and settlement for personal or property losses [except as provided].
- D. **Reimbursement for Medical Costs**, including all payments received by the family that are specifically for, or in reimbursement of, medical expenses for any family member.
- E. **Live-in Aide**, including the income of a live-in aide employed because of a medical condition or disability of a family member. A live-in aide is determined to be essential to the care and well-being of the person, not obligated for the support of the person, and would not be living in the unit except to provide the necessary supportive services.
- F. **Education Assistance**, including the full amount of educational scholarships paid directly to the student or to the educational institution, and Government funds paid to a veteran for tuition fees, books, equipment, materials, supplies, transportation and miscellaneous personal expenses of the student. Any amount of such scholarship or payment to a veteran not used for the above purposes that is available for subsistence is to be included in income.
- G. **Armed Forces (Special Pay)**, specifically special pay to a family member serving in the Armed Forces who is exposed to hostile fire.
- H. **Government Programs**, including the following:
 - Amounts received under training programs funded by HUD and earnings and benefits from participation in qualifying State or local employment training programs (including training programs not affiliated with a local government.)
 - Amounts received by a disabled person that are disregarded for a limited time for purposes of Supplemental Security Income (SSI) eligibility and benefits, because they are set aside for use under a Plan to Attain Self-Sufficiency (PASS).
 - Amounts received by a participant in other publicly-assisted programs, which are specifically for or in reimbursement of out-of-pocket expenses incurred (special equipment, clothing, transportation, child care, etc.) and made solely to allow participation in a specific program.
 - Amounts specifically excluded by any other Federal statute from consideration as income for purposes of determining eligibility or benefits under a category of assistance programs that includes assistance under the U.S. Housing Act of 1937.
 - Amounts paid by a State agency to a family with a member who has developmental disability and is living at home to offset the cost of services and equipment needed to keep the developmentally disabled family member living at home.

- I. **Temporary Income**, considered temporary, nonrecurring or sporadic in nature (including gifts).
- J. **Income of Full-Time Students**, earnings in excess of \$480 for each full-time student 18 years old or older attending school or vocational training (excluding the head of household and spouse).
- K. **Property Tax Refunds**, including amounts received by the family in the form of refunds or rebates under State or local law for property taxes paid on the dwelling of the unit.
- L. **Adoption Assistance Payments**, in excess of \$480 per adopted child.

DOCUMENTING ECONOMIC IMPACT DURING COVID-19 PANDEMIC PERIOD

Applicant households must submit documentation confirming negative economic impact during the COVID-19 pandemic period. Acceptable documentation sources include:

- A copy of household member(s) notification of job loss/termination from employer during the eligible pandemic period (March 27, 2020 to present); **OR**
- A copy of household member(s) notification of furlough from employer during the eligible pandemic period (March 27, 2020 to present); **OR**
- A copy of household member(s) notification confirming reduction in hours and/or pay during the eligible pandemic period (March 27, 2020 to present); **OR**
- A copy of household member(s) application during the eligible pandemic period (March 27, 2020 to present) and/or approval for Unemployment Insurance benefits; **OR**
- A signed self-certification that includes the name of the household member who is self-employed, the name and nature of the business, and narrative confirming economic impact on self-employment during eligible pandemic period (March 27, 2020 to present).

RENTAL ASSISTANCE

Rental assistance includes:

- a. Monthly Rental Payment made on behalf of eligible household to landlord/property management agent or company of up to \$1,000 per month for a maximum of 3 months; or
- b. Monthly Rental Arrears Payment made on behalf of eligible household to landlord/property management agent or company of up to \$1,000 per month for a maximum of 3 months; or
- c. Monthly payment combination of items a. and b. made on behalf of eligible household to landlord/property management agent or company, provided that the total payment for any one-month period does not exceed \$1,000;
- d. Not all households will qualify for the maximum payment. For example, if a tenant's monthly rent is \$800, the landlord/management company may receive up to \$800 per month on behalf of the tenant. Also, if a tenant has paid a portion of the rent, LB CARES may pay a portion of the rent up to \$1,000 per month (for up to 3 months).

PROVIDING EMERGENCY RENTAL ASSISTANCE

Emergency rental assistance will be provided for monthly rent payments and/or outstanding rent balance. Program administrators shall determine the duration and amount of rental assistance provided to eligible households based on application information, monthly rent due, and amount in arrears. This duration and assistance amount will be designed to ensure households are provided with the maximum benefit possible under program limits up to a maximum of 3 months.

Emergency rental assistance will not be paid directly to households. Rent payments on the tenants' behalf may be paid to the bona fide landlord/property management agent or company.

CONFIRMING CURRENT LEASE AGREEMENT

An applicant household must submit a copy of its current residential lease agreement for the address they reside in as a part of the emergency rental assistance application.

LANDLORD. PROPERTY MANAGEMENT AGENT OR COMPANY

A bona fide landlord/property management agent or company is defined as the legal owner and/or representative of a single-family, multi-unit, or mobile home residential property leased for the purposes of permanent housing, entitled to collect rent as prescribed in a valid lease agreement.

In order to process and disburse emergency rental assistance payments to a bona fide landlord/property management agent or company, signed and completed W-9 and Program Participation-Payment Acceptance Agreement forms are required. The landlord/property management agent or company will abide by LB CARES program requirements and will be provided with a clear summary and schedule of payments to be made on behalf of eligible households.

In addition, the landlord/property management agent or company will be provided with an IRS 1099 form at the end of the calendar year for tax reporting purposes.

W-9 FORM (PROPERTY OWNER TO COMPLETE)

A completed W-9 form from the bona fide landlord/property management agent or company must be submitted prior to the issuance of any rental assistance payments. The City will send this form to the bona fide landlord/property management agent or company after the tenant has been selected through the lottery process.

PROGRAM PARTICIPATION-PAYMENT ACCEPTANCE FORM (PROPERTY OWNER TO COMPLETE)

A signed Program Participation-Payment Acceptance Agreement from the bona fide landlord/property management agent or company must be to proceed with payment. The City will send this form to the bona fide landlord/property management agent or company after the tenant has been selected through the lottery process. Within this form, the bona fide landlord/property management agency or company must confirm the applicant's current rental balance.

To request this information in an alternative format or to request a reasonable accommodation, please contact the Development Services Department at longbeach.gov/lbds and 562.570.3807. A minimum of three business days is requested to ensure availability; attempts will be made to accommodate requests with shorter notice.